

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (4/98)

Approved for use through 9/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

90098008

First Inventor or Application Identifier

Steven Don Arnold et al

Title

VARIABLE GEOMETRY TURBOCHARGER

Express Mail Label No.

EE697936782 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ \*Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)

2. ☒ Specification (preferred arrangement set forth below) Total Pages **13**

- Descriptive title of the invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the invention
- Brief Summary of the invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets **15**

4. Oath or Declaration Total Pages **3**

- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. 1.63(d))  
(for continuation/divisional with Box 16 completed)

[Note Box 5 below]

- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 C.F.R. 1.63(d)(2) and 1.33(b).

[NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY  
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. 1.27), EXCEPT  
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. 1.28).

5. ☐ Microfiche Computer Program (Appendix)

6. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
13. ☐ \* Small Entity Statement(s) ☐ Statement filed in prior application,  
Status still proper and desired
14. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15. ☒ Other: **unsigned Declaration**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

or ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Felix L. Fischer - Law Department				
	AlliedSignal Inc. - Turbocharging Systems				
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	Suite 200				
City	Torrance	State	CA	Zip Code	90505
Country	USA	Telephone	(310) 791-9120	Fax	(310) 791-9125

Name (Print/Type) Felix L. Fischer

Registration No. (Attorney/Agent)

31,614

Signature

*[Signature]*

Date

9/30/99

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 1999</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.</p>		<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>To be assigned</td> </tr> <tr> <td>Filing Date</td> <td>09/30/1999</td> </tr> <tr> <td>First Named Inventor</td> <td>Steven Don Arnold et al.</td> </tr> <tr> <td>Examiner Name</td> <td>To be assigned</td> </tr> <tr> <td>Group / Art Unit</td> <td>To be assigned</td> </tr> <tr> <td>Attorney Docket No.</td> <td>90098008</td> </tr> </table>		Application Number	To be assigned	Filing Date	09/30/1999	First Named Inventor	Steven Don Arnold et al.	Examiner Name	To be assigned	Group / Art Unit	To be assigned	Attorney Docket No.	90098008
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Attorney Docket No.	90098008														
TOTAL AMOUNT OF PAYMENT	(\$ ) 760.00														

<p><b>METHOD OF PAYMENT (check one)</b></p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">01-1125</span></p> <p>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">AlliedSignal Inc.</span></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input type="checkbox"/> Payment Enclosed:  <input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p> <p><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101 760</td> <td>201 380</td> <td>Utility filing fee</td> <td rowspan="5" style="text-align: center; vertical-align: middle;">760 -</td> </tr> <tr> <td>106 310</td> <td>206 155</td> <td>Design filing fee</td> </tr> <tr> <td>107 480</td> <td>207 240</td> <td>Plant filing fee</td> </tr> <tr> <td>108 760</td> <td>208 380</td> <td>Reissue filing fee</td> </tr> <tr> <td>114 150</td> <td>214 75</td> <td>Provisional filing fee</td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td style="text-align: center;">(\$ ) 760.00</td> </tr> </tbody> </table> <p><b>2. 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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Felix L. Fischer	Registration No. (Attorney/Agent)	31,614
Signature		Telephone	(310) 791-9120
		Date	9/30/99